

Media, PA—Congressman Joe Sestak (D-PA) this week conducted a roundtable discussion with breast cancer survivors and patient care advocates to consider the challenges to appropriate care faced by patients, family members, and treatment providers, and explore need changes in legislation. — “America’s health security is a top priority and the reason I decided to run for Congress,” the Congressman said. “Living in a cancer ward with my daughter, I can understand the challenge families face when they receive a cancer diagnosis. I was fortunate that my daughter was able to receive outstanding care and I want to help ensure that all families have the same opportunities to access the highest standard of care.”

Since taking office in January 2007, Congressman Sestak has made breast cancer treatment and research a top priority. He was a leading supporter of Congressional action to increase the National Institute of Health budget for breast cancer treatment from \$585 million to \$650 million in FY 08. In addition, he has signed a Colleague letter requesting that the Department of Defense increase its budget for breast cancer research from \$127 million to \$150 million. Congressman Sestak is a proud co-sponsored of three bills that address issues related to breast cancer treatment and research:

- H.R. 758 requires that health plans provide coverage for a minimum hospital stay of two days for mastectomies, lumpectomies, and lymph node dissection for the treatment of breast cancer and coverage for secondary consultations.
- H.R. 1157, Breast Cancer Environmental Research Act, would improve the flexibility of grants awarded to public and not-for-profit entities for the development and operation of centers to conduct multidisciplinary and multi-institutional research on environmental factors that may be related to the etiology of breast cancer.
- H.R. 1132 would allow for the waiver of requirements for awarding breast and cervical cancer grants that require 60% of grant funds to be spent on screening and referrals for medical treatment and no more than 40% on other activities. This will give states greater flexibility to utilize these funds, as long as the state expands the level of screening and follow-up services provided from its own funds.

In addition to breast cancer survivors, participants in the roundtable included representatives of the following organizations:

The Breast Cancer Coalition
Surgical Care Associates
The Linda Creed Breast Cancer Foundation
Chester County Hospital
Crozer Cancer Center
Delaware County Medical Society
Main Line Oncology

All of the participants spoke passionately about their personal and professional struggles to

meet the challenges of a breast cancer diagnosis. The following were some of the issues discussed during the hour-long meeting:

- Discussing the provisions of H.R. 758 (see page 1), Congressman Sestak and meeting participants discussed expanding this legislation to provide patients who choose to go home after mastectomies, lumpectomies, and lymph node dissection with insurance coverage for home health care for the same 48-hour period as those who choose to remain in the hospital.
- For breast cancer patients, one of the most critical concerns is the lack of information available about services, treatment options, insurance coverage, etc. There needs to be a much greater coordination of information and patient advocates should be made available to patients and their families to help them sort through the maze of issues they face.
- Despite federal and state remedies that have been enacted over the last several years, there remains a substantial number of breast cancer patients who either have no insurance or are under-insured. These patients usually fall through the cracks because their income level is not low-enough to qualify for government-funded insurance, but not high enough for them to be able to pay for either insurance or treatment themselves. In addition, medical professionals often face financial hardships when the insurance companies fail to reimburse at anticipated levels for services provided.
- Changes in Medicare requirements have created substantial hardships for both patients and treatment providers. Roundtable participants described a dramatic reduction in the standard of patient care and the lack of availability of hospital beds as a direct result of the new Medicare restrictions.
- The Delaware Valley in particular is suffering from a “medical brain drain.” Many healthcare providers have left or may be considering leaving the area due to insurance costs, the availability of malpractice insurance, and other economic issues. This creates a potential crisis in access to adequate healthcare services in the region, requiring patients to either wait for long periods of time to get appointments, or to travel long distances to access service.
- Medical malpractice insurance is a challenge in Pennsylvania. Participants explained that malpractice insurance is not readily available or may be cost-prohibitive to doctors who choose to work part time. Therefore doctors with families who do not wish to work full-time hours may essentially be denied the ability to work in their profession at all.
- Caps on the number of doctor visits allowed under Medicaid is a substantial problem for patients with serious illnesses. It seems that the caps were designed to accommodate healthy people who only require a limited number of visits per year. Those struggling with illness face the burden of obtaining an exemption from the cap provisions in order to see their doctors more often.

“I found this meeting to be a tremendous educational experience,” Congressman Sestak said. “I am very concerned about the issue of breast cancer health both here in the District and in the

country. The passion and the expertise of the roundtable participants has helped me to explore this issue on a much more personal level.”

Born and raised in Delaware County, former 3-star Admiral Joe Sestak served in the Navy for 31 years and now serves as the Representative from the 7th District of Pennsylvania. He led a series of operational commands at sea, including Commander of an aircraft carrier battle group of 30 U.S. and allied ships with over 15,000 sailors and 100 aircraft that conducted operations in Afghanistan and Iraq. After 9/11, Joe was the first Director of "Deep Blue," the Navy's anti-terrorism unit that established strategic and operations policies for the "Global War on Terrorism." He served as President Clinton's Director for Defense Policy at the National Security Council in the White House, and holds a Ph.D. in Political Economy and Government from Harvard University. According to the office of the House Historian, Joe is the highest-ranking former military officer ever elected to the U.S. House of Representatives.